## Department of Transportation—Jederal Aviation Administration

## Supplemental Type Certificate

Number SA3257SW-D

This certificate, issued to

Century Flight Systems, Inc.

F.M. 1195

P. O. Box 610

Mineral Wells, TX 76067

certifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the airworthiness requirements of Part 23

of the Federal Aviation

Regulations.

Original Product - Type Certificate Number: A29CE

Make: Beech

Model: 76

Description of Type Design Change:

Installation of Mitchell Automatic Flight System Model AK693 consisting of a Century III Autopilot with Optional Radio Coupler and Glide Slope Coupler according to Bulltin No. 822 dated 1-3-78 and Master Drawing List No. 87A975 dated 1-3-78 (14 Volt System), or later FAA approved revision.

Limitations and Conditions
Pilot's Operating Handbook and FAA/DAS Approved Airplane Flight Manual Supplement
P/N 68S625-S dated 1-25-78 is required.

Placard P/N 13A660-1 is required.

Compatibility of this modification with other previously approved modifications must be determined by the installer. This certificate and the supporting data which is the basis for approval shall remain in effect until sur-

rendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the

Federal Aviation Administration.

Date of application:

1-3-78

Sale reissued: 3-28-84 Revision 1

Date of issuance:

1-25-78

Tale umended :



By direction of the Administrator T. D. W. D. Roser

Don P. Watson (Signature)

Manager, Aircraft Certification Division

Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

he FAA will reissue the certificate in the name of the transferee and forward it to him.	
	TRANSFER ENDORSEMENT
ransfer the ownership of Su	pplemental Type Certificate Number
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O (Name of transferee)	
Address of transferee)	(Number and street)
	(City, State, and ZIP code)
rom (Name of grantor) (Print	or type)
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Address of grantor)	(Number and street)
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Extent of Authority (if lice)  Date of Transfer:	(City, State, and ZIP code)  nsing agreement):